

10/561816

APPLICATION DATA SHEET  
IAP20 Rev'd PCT.PTO 21 DEC 2005

### Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: BODY FLUID SAMPLING IMPLEMENT AND  
BODY FLUID SAMPLING METHOD

Attorney Docket Number:: 027550-177

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 6

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Masao

Middle Name::

Family Name:: TAKINAMI

Name Suffix::

City of Residence:: Nakakoma-gun

State or Province of Residence:: Ymanashi-ken

Country of Residence:: Japan

Street of Mailing Address:: c/o Terumo Kabushiki Kaisha, 1727-1, Tsuijjarai,  
Showa-cho

City of Mailing Address:: Nakakoma-gun

State or Province of Mailing  
Address:: Ymanashi-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing  
Address:: 406-3853

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Masafumi
Middle Name::	
Family Name::	TAKEMOTO
Name Suffix::	
City of Residence::	Nakakoma-gun
State or Province of Residence::	Ymanashi-ken
Country of Residence::	Japan
Street of Mailing Address::	c/o Terumo Kabushiki Kaisha, 1727-1, Tsuijirai, Showa-cho
City of Mailing Address::	Nakakoma-gun
State or Province of Mailing Address::	Ymanashi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	406-3853

### **Correspondence Information**

Correspondence Customer Number::	21839
Phone Number::	(703) 836-6620
Fax Number:	(703) 836-2021

### **Representative Information**

Representative Customer Number::	21839
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### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/JP2004/009068	06/22/04

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Japan	2003-178749	06/23/03	Yes

### **Assignee Information**

Assignee Name::	Terumo Kabushiki Kaisha
Street of Mailing Address::	44-1, Hatagaya 2-chome, Shibuya-ku
City of Mailing Address::	Tokyo
State or Province of Mailing Address::	
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	